
**Medical Care Advisory Committee
May 15, 2012 Meeting Minutes****Present**

Sue Berkowitz
William Bilton
Dr. Charles Darby, Jr.
Richard D'Alberto
Dr. Tom Gailey
Dr. Greta Harper
Alicia Jacobs
Lea Kerrison
Bill Lindsey
Gloria McDonald
Melanie Matney
Dr. Kashyap Patel
Dr. Amy Picklesimer
Gloria Prevost
Crystal Ray
Jackie Richards
Tim Stuart
Dr. Caughman Taylor
Nathan Todd
Dr. Lynn Wilson
Lathran Woodard

Not Present

John Barber
Diane Flashnick
Chief Bill Harris
Rhonda White-Johnson, PH.D
J.T. McLawhorn

Director Keck welcomed members and provided agency updates

Roy Hess presented the SFY 2012 budget update. He explained state agency, medical contracts and other operating contracts are below budget primarily because of claims and payment timing. He stated in some areas SCDHHS is over budget. One area he talked about was DJJ which had 65 births; this was an increase from last year. Roy stated the SCDHHS budget is on the Senate floor and that SCDHHS staff will be reviewing the budget tomorrow.

Melanie "Bz" Giese presented a Power Point that included the HEART initiative, Managed Care Contracts and Foster Care. She stated the HEART initiative is trying to reach people where they are spending a lot of time. There were some suggestions from MCAC members to educate pharmacists because they can help with complex patients. Members discussed how to engage pharmacists as extensions of medical homes and discussed barriers to care access such as transportation and inconvenient hours. One member talked about how Pharmacy and retail fall into another silo and recommended that information be shared about patients so everyone knows the patients conditions. BZ stated both the MCO and

MHN contracts have been extended through June 30th. She stated there was a cap rate increase of 3.3% and SSI child rate cell added and priced. BZ stated starting July 1, 2012 approx. 3,000 children in foster care will be moved into managed care. SBIRT has been revamped and there have been greater screenings from MCO's and MHN's.

John Supra presented a Power Point that included Medicaid trends, QIO, and Enhanced Provider Enrollment. He discussed the Medicaid trends and stated the increased enrollment growth is primarily in children and family planning. He also stated KePRO will take over Prior Authorization (PA) services June 1, 2012 and all claims submitted after July 3, 2012, will need to follow the new KePRO PAs. John stated SCDHHS will be implementing enhanced provider enrollment due to CMS regulations. The key federal regulations are: background checks for high risk providers, pre and post enrollment on-site visits and revalidation every 5 years (3 years for DME providers). August 2012 is the implementation date for the Enhanced Provider Enrollment. To prepare for these changes, SCDHHS is updating provider enrollment policy to align with new regulations, developing new procedures, implementing enrollment and screening processes and making sure there is provider awareness, education and training. A Medicaid bulletin has been sent to providers and there will be updated information on the SCDHHS website.

Sam Waldrep discussed SC DuE and stated South Carolina (SC) is one of fifteen states engaged in the planning process for dually eligible individuals. The target population is 65 and older living in the community. SC has proposed a phased-in approach geographically: coastal regions by January 1, 2014, Midlands and Upstate regions by July 1, 2014. Sam stated the plan is out for public comment and SCDHHS is still taking comments. This is universally supported by all states and there are 39 states that have asked to participate. He also stated there is a proposed amendment for Pervasive Developmental Disorder (PDD) waiver. SCDHHS has administrative oversight but it is operated through DDSN. This will improve access for children receiving new intensive services. SC has had difficulty attracting line therapists so there will be two levels of service with different rates. The new rate and qualifications should help improve the access of services to PDD children. This proposed amendment would also give priority to children receiving similar services through Baby Net (would go out of Baby Net into the PDD waiver). The quality assurance oversight processes will ensure standardized processes.

Advisements on upcoming State Plan Amendments (SPAs) were given by Roy Hess, John Supra, and Valeria Williams.

Roy Hess discussed the Discontinuing Cost Settlements for State Agencies and Hospitals SPA. He said a letter went out in the Fall stating this would be removed 7/1/12. Also, public meetings were held October, December and April discussing this SPA. Individual budget sessions will be held to discuss the elimination of this.

Roy stated some providers are overpaid and some are underpaid. SCDHHS is setting a fair market. He also stated public notices are going out this week regarding this matter.

Roy also discussed the elimination of Retrospective Cost Settlement Payments for Inpatient and Outpatient Hospital Services SPA. SCDHHS has been verbally communicating with the Hospital association and holding monthly meetings with the Financial Hospital association regarding this change. He stated Interim payments equaled 12 million more than what should have been paid and said there are some blended rates but many rates are down to one. Public Notice will be posted regarding this issue.

John discussed the Express Lane Eligibility SPA. The Express Lane Eligibility SPA will look at children enrolled in SNAP and TANF that are not currently enrolled in Medicaid. SCDHHS is trying to bring more people into the system. A budget has been proposed to use Express Lane Eligibility. This SPA will be effective 7/1/12 and a public notice will be posted. MCAC members did have questions regarding if SCDHHS would also reach out to families and wanted SCDHHS to look at children who are American citizens born to alien parents. MCAC member wanted SCDHHS to ensure these children were receiving all the services needed.

Valeria discussed the Payment Adjustments for Provider-Preventable Conditions (PPCs) including Health Care Acquired Conditions (HCACs) SPA. She stated this will reduce claim payments for PPCs including HCACs. SCDHHS will implement policy to extend the HCACs and PPCs to Outpatient hospital, ambulatory Surgical Center and practitioners. Val also discussed the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) SPA. This will update the EPSDT periodicity schedule to include eight additional preventative visits for recipients under the age of 21.

Sheila Chavis gave an update on the submission of the TCM State Plan Amendments (SPAs) and Sam Waldrep explained the TCM rates. Sheila also discussed all the SPAs that have been approved from February to present.

Director Keck discussed the Balanced Scorecard. He stated this is a management tool that is widely used. He also stated to build a successful organization a balanced approach has to be taken. Director Keck asked for feedback from MCAC members and a lot of suggestions were made.

Meeting Adjourned

Next meeting scheduled for Tuesday, August 14, 2012 from 9:30AM to 12:30 PM